#### ONE HUNDRED EIGHTEENTH CONGRESS

# Congress of the United States House of Representatives

COMMITTEE ON ENERGY AND COMMERCE 2125 RAYBURN HOUSE OFFICE BUILDING WASHINGTON, DC 20515-6115

> Majority (202) 225-3641 Minority (202) 225-2927

February 22, 2023

Ms. Kandi Pickard President and Chief Executive Officer National Down Syndrome Society 1155 15<sup>th</sup> Street NW, Suite 540 Washington, D.C. 20005

Dear Ms. Pickard:

Thank you for appearing before the Subcommittee on Health on Wednesday, February 1, 2023, to testify at the hearing entitled "Lives Worth Living: Addressing the Fentanyl Crisis, Protecting Critical Lifelines, and Combatting Discrimination Against Those with Disabilities."

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. The format of your responses to these questions should be as follows: (1) the name of the Member whose question you are addressing, (2) the complete text of the question you are addressing in bold, and (3) your answer to that question in plain text.

To facilitate the printing of the hearing record, please respond to these questions by the close of business on Wednesday, March 8, 2023. Your responses should be mailed to Jolie Brochin, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, D.C. 20515 and e-mailed in Word format to Jolie.Brochin@mail.house.gov.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,
But Suther

Brett Guthrie

Chair

Subcommittee on Health

### **Attachment 1—Additional Questions for the Record**

### The Honorable Gus Bilirakis

- 1. Mrs. Pickard, the QALY methodology seems rather subjective: Could you please elaborate on the arbitrary nature of QALYs?
  - What are the ethical implications of the Institute of Clinical and Economic Review (ICER) model and its utilization of QALYs?
  - What lessons should the United States learn from the controversial utilization of QALYs in other global health care systems?

## **The Honorable Michael Burgess**

- 1. How else, besides using QALY measurements, can Congress determine cost-effectiveness for care while also acknowledging the inherent value of every person?
- 2. How have QALYs been used previously to restrict access to treatments?
- 3. What has happened as a result?